Data Extract v5.3

Programming Guide

1 Introduction

The *Legacy Extract Guide* provides programmers with guidelines for developing programs that extract data from the Legacy system to create the files required to feed MCSource. By using this guide to develop extract programs, we can ensure correct and useful data for the MCSource system.

The document includes the following information:

- Extract File Layout Overview
- Extract Program Input, Processing, and Output Requirements.
- Extract Program Testing.
- Extract Process Implementation.
- Extract File Specifications – Product
- Extract File Specifications – Product Client Contract
- Extract File Specifications – Member
- Extract File Specifications – Provider
- Extract File Specifications – Inpatient Claims
- Extract File Specifications – Professional and Other Outpatient Claims
- Extract File Specifications – Pharmacy Claims
- Extract File Specifications – Observations (optional)
- Extract File Specifications – HSI Trans (optional)
- Extract File Specifications – Capitation (optional)
- Extract File Specifications – Client Contract Premium (optional)
- Extract File Specifications – NDC (optional)
- Extract File Specifications – Zip Code (optional)

2 Extract File Layout Overview

The MCSource installation team will supply you with COBOL file definitions (copybooks) that represent the desired file output format of your extracts. These file definitions in conjunction with this Data Extract Guide and the Mapping Worksheets supply the format of the requested data feeds as well as the rules to be applied to each field.

FYI – these files are fed into the MCSource Standard Reformat process which is written in C and Micro Focus Cobol. This process performs extensive editing of the data to ensure proper loading of the data to the MCSource Data Warehouse.

3 Extract Program Input, Processing, and Output Requirements

This section includes guidelines to follow when you design your extract program inputs, and the processing required to generate the requested output files. If you have any questions, comments, issues, or concerns with these guidelines let the MCSource installation team know as the issues are encountered.

Extract Program Inputs

When designing extract program inputs, remember that the extract programs:

- Must be developed to run on the legacy system**.**
- Must extract all required fields, at a minimum, for the data to be successfully processed by the MCSource system.
- Need to accept date parameters in order to select data for a requested time-frame. For example paid date for services, eligibility span begin and end dates for member data, etc. This provides for the flexibility of creating multi-month extracts for initial data warehouse loads, as well as smaller extracts used to feed the cyclical MCSource update cycles.

Extract Program Processing

When designing extract program processing, remember:

- The extract programs must extract data based on the begin date and end date input parameters. The program determines what data to extract for a particular cycle period so that only the appropriate data, i.e. new or changed data, is extracted from the legacy system.
- The extract programs must extract all data as ASCII text. All data must be uncompressed and unpacked. Packed data cannot be processed by MCSource Standard Reformat.
- MCSource Standard Reformat can perform code conversion mapping and defaulting, code value validations, and for some fields it can even convert code values that exceed the allowed length of the field in the copybook (field length exceptions are identified in the mapping worksheets). However if a field is to be populated with a concatenation, which is common in the case of legacy ids, this must be accomplished in the extract process.
- Mappings can be accomplished with MCSource's mapping process.
- The extract programs must perform necessary conversions to the input record data as follows:

If a Legacy System field contains Nulls - convert to zeroes for fields defined as numeric; convert to spaces for fields defined as alphanumeric; or default as applicable.

All Numeric/Integer values (including dates) – field value should be right justified with leading bytes zero filled.

Signed fields – Field must have its positive or negative sign formatted in the left-most byte of the field. This can be accomplished by defining the field with the COBOL phrase SIGN LEADING SEPARATE after the PIC clause. The sign byte, in this case, is an additional byte to the PIC clause.

For example, a dollar amount field defined on the legacy record as PIC S9(7)v99 containing the value -100 should be defined in the output extract record as:

PIC S9(7)v99 SIGN LEADING SEPARATE. This results in a 10-byte field containing the value –000010000.

Decimals and Commas – Numeric fields cannot contain decimals or commas. The last two (right most) characters of dollar amount fields should be for the cents placement, but must not include decimals.

Alphanumeric fields – field value should be uppercase, left-justified, with trailing bytes filled with spaces, not nulls! Note: Text fields can not contain double quotes (").

MCS Filler fields – Reformat Internal use. These fields occur at the end of the extracts after the user mapped fields. They appear either as "MCS_FILLER" or in the following format "L_*****_RI_SW". These fields are for Reformat Internal use and should always be filled with "N"s for all records including adjustments and voids.

Date fields – Should be formatted as CCYYMMDD with four digit year values.

Extract Program Outputs

When designing extract program output, remember that the extract programs:

- Must be written to create files in the format expected by the MCSource Standard Reformat programs. These formats are depicted by the extract file layout design and defined in the MCSource COBOL copybooks.

- The extract process should run on the legacy data system. The output from this process needs to ultimately be written to the MCSource server in the /mcsdata/legacy directory following the naming convention listed below:

Inpatient -
std_inp_claim_headers
std_inp_claim_lines

PFO -
std_pfo_claims

Pharmacy -
std_pharm_claims

Member -
std_member

Provider -
std_provider

Product -
std_product

Product Client Contract -
std_product_client_contract

Observations (optional) -
std_observation

HSI Trans (optional) -
std_hsi_trans

Capitation (optional) –
std_capitation

Premium (optional) –
std_client_contract_prem

NDC (optional) -
ndc.odl

Zip Code (optional) –
zip.odl

4 Extract Program Testing

When testing the extract program, the programmer needs to adhere to the following requirements:

- Extract programs **should be** fully tested according to your in-house programming procedures.
- Extract data should be thoroughly reviewed to ensure that it meets the requirements set forth in this document, as well as the data mapping worksheets. Incorrect or incomplete data will be rejected by the MCSource Standard Reformat process.
- Files may be transmitted to VIPS, for Reformat and Discovery, via 4 ml or 8 ml tapes, mainframe cartridges, or they may be deposited on VIPS' ftp site. When using the ftp site for extract files the following naming convention should be adhered to; a prefix identifying the originating client, the extract module, and the date. For example, "Client1" + "PFO" + "7_24".

5 Extract Process Implementation

After the extract files are loaded to the MCSource server, the MCSource Standard Reformat process can be run. This process will validate that the legacy data has been extracted in the appropriate format and that it passes at least a minimum set of edits.

The Reformat process is modularized into sub-processes for each extract file. Sub-processes performed include: validity edits; mapping of legacy codes to MCSource codes; referential integrity checking; and formatting of data in preparation for loading the data warehouse via the MCSource Data Integration process.

Each of the Reformat sub-processes generate record counts as well as reject / edit counts. The criteria for rejecting records is defined during the mapping sessions. If the number of rejected records is significant, the extract routines will need to be reviewed and possibly regenerated.

In addition to the standard Reformat reports there is a subsystem of the MCSource Data Integration (DI) System called Discovery that is also used to review the data prior to moving it into the warehouse. Discovery is an HTML-based statistical gathering and reporting system that can be run cyclically or on-demand to search for irregularities in distribution, counts, or referential integrity in the extracted data. The Discovery process does not modify or enhance data; its purpose is to reveal problems in legacy data or in the translation of client data to MCSource tables.

6 Extract File Specifications

Product Extract

The product extract typically consists of one record per product. Because the number of products is usually small this file is typically maintained as a table in the MCSource Access database. This database includes much of the code mapping, conversion, and validation instructions as well as all applicable MCSource codeset values and any site specific codeset values.

If Access is not used for the product records they will then be part of the cyclical extract process and they must be formatted into **one extract file** (named std_product) in the following file layout:

Field Num	Field	Type	Starting Position	Length	Notes
1	LEGACY_PRODUCT_ID	CHAR	1	35	REQUIRED FIELD
2	PRODUCT_ID	INTEGER	36	10	
3	PRIMARY_LEGACY_SOURCE_CODE	CHAR	46	5	REQUIRED FIELD
4	PRODUCT_NAME	CHAR	51	50	
5	PRODUCT_GRP01_CODE	CHAR	101	15	
6	PRODUCT_GRP02_CODE	CHAR	116	15	
7	PRODUCT_GRP03_CODE	CHAR	131	15	
8	PRODUCT_GRP04_CODE	CHAR	146	15	
9	PRODUCT_GRP05_CODE	CHAR	161	15	
10	PRODUCT_GRP06_CODE	CHAR	176	15	
11	PRODUCT_GRP07_CODE	CHAR	191	15	
12	PRODUCT_GRP08_CODE	CHAR	206	15	
13	PRODUCT_GRP09_CODE	CHAR	221	15	
14	PRODUCT_GRP10_CODE	CHAR	236	15	
15	ETG_DATE	DATE	251	8	CCYYMMDD
16	MEMBER_DETERM_DAY_NUM	INTEGER	259	10	
17	READMISSION_DAYS_NUM	INTEGER	269	10	
18	MEMBER_MONTHS_IND	CHAR	279	1	
19	PCP_IND	CHAR	280	1	
20	MCS_FILLER	CHAR	281	1	REQUIRED FIELD Must be = N

Product Client Contract Extract

The product client contract extract typically consists of one record per client contract. This file can also optionally be maintained as a table in the Access database if there is a relatively low-volume of records that do not require frequent updates.

If Access is not used for these records they will then be part of the cyclical extract process and they must be formatted into **one extract file** (named std_product_client_contract) in the following file layout:

* Note: Client Contract Group Codes vary in field length

Field Num	Field	Type	Starting Position	Length	Notes
1	CLIENT_CONTRACT_ID	INTEGER	1	10	
2	LEGACY_CLIENT_CONTRACT_ID	CHAR	11	40	REQUIRED FIELD
3	NATIONAL_EMPLOYER_ID	CHAR	51	10	
4	BEGIN_DATE	DATE	61	8	CCYYMMDD
5	END_DATE	DATE	69	8	CCYYMMDD
6	CLIENT_CONTRACT_TYPE_CODE	CHAR	77	10	
7	CLIENT_CONTRACT_DESC	CHAR	87	50	
8	CLIENT_CONTRACT_GRP01_CODE*	CHAR	137	15	
9	CLIENT_CONTRACT_GRP02_CODE*	CHAR	152	15	
10	CLIENT_CONTRACT_GRP03_CODE*	CHAR	167	15	
11	CLIENT_CONTRACT_GRP04_CODE*	CHAR	182	15	
12	CLIENT_CONTRACT_GRP05_CODE*	CHAR	197	15	
13	CLIENT_CONTRACT_GRP06_CODE*	CHAR	212	15	
14	CLIENT_CONTRACT_GRP07_CODE*	CHAR	227	15	
15	CLIENT_CONTRACT_GRP08_CODE*	CHAR	242	15	
16	CLIENT_CONTRACT_GRP09_CODE*	CHAR	257	15	
17	CLIENT_CONTRACT_GRP10_CODE*	CHAR	272	15	
18	CLIENT_CONTRACT_GRP11_CODE*	CHAR	287	15	
19	CLIENT_CONTRACT_GRP12_CODE*	CHAR	302	15	
20	CLIENT_CONTRACT_GRP13_CODE*	CHAR	317	6	
21	CLIENT_CONTRACT_GRP14_CODE*	CHAR	323	6	
22	CLIENT_CONTRACT_GRP15_CODE*	CHAR	329	6	
23	CLIENT_CONTRACT_GRP16_CODE*	CHAR	335	6	
24	CLIENT_CONTRACT_GRP17_CODE*	CHAR	341	6	
25	CLIENT_CONTRACT_GRP18_CODE*	CHAR	347	6	
26	CLIENT_CONTRACT_GRP19_CODE*	CHAR	353	4	
27	CLIENT_CONTRACT_GRP20_CODE*	CHAR	357	4	
28	CLIENT_CONTRACT_GRP21_CODE*	CHAR	361	1	
29	CLIENT_CONTRACT_GRP22_CODE*	CHAR	362	1	
30	CLIENT_CONTRACT_GRP23_CODE*	CHAR	363	1	
31	CLIENT_CONTRACT_GRP24_CODE*	CHAR	364	1	
32	CLIENT_CONTRACT_GRP25_CODE*	CHAR	365	1	

Field Num	Field	Type	Starting Position	Length	Notes
33	STOP_LOSS_AMT	DECIMAL	366	S 7.2 (10)	PIC S9(7)V9(2) SIGN LEADING SEPARATE Field must have positive or negative sign in left-most byte. No decimal points or commas. If data not available, send 0s with leading sign instead of blanks Example: '+000010000' = $100.00.
34	MCS_FILLER	CHAR	376	1	REQUIRED FIELD Must be = N

Member Extract

The membership extract typically consists of one record per member. When a member has multiple eligibility periods or has changed PCPs multiple records are generated for the member. The member data should be the most recent status of the member information and should be identical for each record. The member eligibility and member pcp information will obviously change each time a new eligibility period or pcp affiliation occurs. Note – while it is not mandatory to sync the eligibility and pcp portions of the record to each other it is mandatory that the pcp portion of the record reflect the correct legacy product id and legacy product client id contract for the time span of the pcp. If either of these id's do not reflect the correct product or client contract for this pcp span the resulting member enrollment records created in DI will be incomplete.

The extract must be formatted into **one extract file** (named std_member) utilizing the following guidelines and written in the following file layout:

- Must extract complete member, eligibility, and PCP information for each member. After the installation of MCSource is complete and the initial data warehouse is loaded, subsequent cyclical member extracts must include all member information in conjunction with any additions or changes to the member's eligibility or PCP information.
- This process needs to be date driven so that all member information is extracted from the legacy system based on begin and end dates as follows:
  - Initial extract – needs to include all member information that falls within the timeframe of history to be stored on the warehouse.
  - Cyclical extracts - need to include all member information that has changed since the previous cyclical extract was run.

Note – PCP records will not be built in Reformat if the PCP ID is missing or defaulted.
Eligibility records will not be built in Reformat if the word "INACTIVE" is placed in the legacy primary insured id field.

Member Data

Field Num	Field	Type	Starting Position	Length	Notes
1	LEGACY_MEMBER_ID	CHAR	1	45	REQUIRED FIELD
2	LEGACY_CONS_MEMBER_ID	CHAR	46	25	REQUIRED FIELD
3	LEGACY_CUST_MEMBER_ID	CHAR	71	25	
4	LEGACY_PRODUCT_ID	CHAR	96	35	REQUIRED FIELD
5	MEDICAID_ID	CHAR	131	25	
6	MEDICARE_ID	CHAR	156	20	
7	SSN	CHAR	176	9	
8	LEGACY_SOURCE_CODE	CHAR	185	5	REQUIRED FIELD
9	DOB_DATE	DATE	190	8	CCYYMMDD
10	DOD_DATE	DATE	198	8	CCYYMMDD
11	PREFIX_NAME	CHAR	206	10	
12	FIRST_NAME	CHAR	216	30	
13	MIDDLE_INITIAL_NAME	CHAR	246	1	
14	LAST_NAME	CHAR	247	30	

Field Num	Field	Type	Starting Position	Length	Notes
15	SUFFIX_NAME	CHAR	277	10	
16	STREET_ADDRESS1_NAME	CHAR	287	30	
17	STREET_ADDRESS2_NAME	CHAR	317	30	
18	STREET_ADDRESS3_NAME	CHAR	347	30	
19	CITY_NAME	CHAR	377	30	
20	STATE_CODE	CHAR	407	2	
21	ZIP_CODE	CHAR	409	9	
22	GENDER_CODE	CHAR	418	1	
23	RACE_ETHNIC_CODE	CHAR	419	2	
24	MARITAL_STATUS_CODE	CHAR	421	10	
25	MEMBER_CLASS_CODE	CHAR	431	3	
26	MEMBER_CLASS2_CODE	CHAR	434	3	
27	MEMBER_CLASS3_CODE	CHAR	437	8	
28	MEMBER_CLASS4_CODE	CHAR	445	8	

Member Eligibility Data

Field Num	Field	Type	Starting Position	Length	Notes
29	LEGACY_CLIENT_CONTRACT_ID	CHAR	453	40	REQUIRED FIELD
30	LEGACY_PRIMARY_INSURED_ID	CHAR	493	45	REQUIRED FIELD
31	RELATIONSHIP_CODE	CHAR	538	2	
32	ELIG_BEGIN_DATE	DATE	540	8	CCYYMMDD
33	ELIG_END_DATE	DATE	548	8	CCYYMMDD
34	BENEFIT_CODE	CHAR	556	10	REQUIRED FIELD
35	ENROLLMENT_REASON_CODE	CHAR	566	8	
36	DISENROLLMENT_REASON_CODE	CHAR	574	8	
37	RATING_CODE	CHAR	582	2	
38	INSURER_COB_CODE	CHAR	584	1	
39	ELIG_CODE	CHAR	585	3	
40	ELIG_CLASS_CODE	CHAR	588	2	
41	ELIG_CLASS2_CODE	CHAR	590	2	
42	ELIG_CLASS3_CODE	CHAR	592	3	
43	ELIG_CLASS4_CODE	CHAR	595	3	
44	ELIG01_IND	CHAR	598	1	
45	ELIG02_IND	CHAR	599	1	
46	ELIG03_IND	CHAR	600	1	
47	ELIG04_IND	CHAR	601	1	
48	ELIG05_IND	CHAR	602	1	
49	ELIG06_IND	CHAR	603	1	
50	PHARM_BENEFIT_IND	CHAR	604	1	

Member PCP Data

Field Num	Field	Type	Starting Position	Length	Notes
51	LEGACY_PROV_ID	CHAR	605	41	REQUIRED FIELD
52	PCP_BEGIN_DATE	DATE	646	8	CCYYMMDD
53	PCP_END_DATE	DATE	654	8	CCYYMMDD
54	PCP_CLASS_CODE	CHAR	662	2	
55	L PROV RI SW	CHAR	664	1	REQUIRED FIELD Must be = N
56	L PRODUCT RI SW	CHAR	665	1	REQUIRED FIELD Must be = N
57	L CLIENT CONTRACT RI SW	CHAR	666	1	REQUIRED FIELD Must be = N
58	MCS FILLER	CHAR	667	3	REQUIRED FIELD Must be = NNN

Provider Extract

The provider extract typically consists of one record per provider. Multiple records may result from changes in a provider's financial affiliation, participation status and/or addresses. Multiple records may also be required because a physician or group sees patients at more than one location or because of changes in a group's address.

The provider data should be the most recent status of the provider information and should be identical for each record. The provider address information will obviously change each time a new address occurs.

The extract must be formatted into **one extract file** (named std_provider) utilizing the following guidelines and written in the following file layout:

- Must extract complete provider and provider address information for each provider. After the installation of MCSource is complete and the initial data warehouse is loaded, subsequent cyclical provider extracts must include all provider information in conjunction with any additions or changes to the provider's address.
- This process needs to be date driven so that all provider information is extracted from the legacy system based on begin and end dates as follows:
  - Initial extract – needs to include all provider information that falls within the timeframe of history to be stored on the warehouse.
  - Cyclical extracts – need to include all provider information that has changed since the previous cyclical extract was run.
  - Must extract complete provider and address information for each financial affiliation. All addresses associated with a financial affiliation must be included in the extract if any information for that affiliation changes within the extract cycle.

Provider Data

Field Num	Field	Type	Starting Position	Length	Notes
1	LEGACY_PROV_ID	CHAR	1	41	REQUIRED FIELD
2	LEGACY_CONS_PROV_ID	CHAR	42	25	REQUIRED FIELD
3	LEGACY_CUST_PROV_ID	CHAR	67	25	
4	TAX_ID	CHAR	92	15	
5	MEDICARE_ID	CHAR	107	20	
6	MEDICAID_ID	CHAR	127	25	
7	LICENSE_ID	CHAR	152	12	
8	DEA_ID	CHAR	164	9	
9	LEGACY_SOURCE_CODE	CHAR	173	5	REQUIRED FIELD
10	ACTIVE_STATUS_IND	CHAR	178	1	
11	BEGIN_DATE	DATE	179	8	CCYYMMDD
12	END_DATE	DATE	187	8	CCYYMMDD
13	DOB_DATE	DATE	195	8	CCYYMMDD
14	PREFIX_NAME	CHAR	203	10	
15	FIRST_NAME	CHAR	213	30	
16	MIDDLE_INITIAL_NAME	CHAR	243	1	

Field Num	Field	Type	Starting Position	Length	Notes
17	LAST_NAME	CHAR	244	30	
18	SUFFIX_NAME	CHAR	274	10	
19	GENDER_CODE	CHAR	284	1	
20	PROV_CATEGORY_CODE	CHAR	285	10	
21	PROV_TYPE_CODE	CHAR	295	8	REQUIRED FIELD
22	SPECIALTY_CODE	CHAR	303	8	
23	SUB_SPECIALTY_CODE	CHAR	311	8	
24	PROV_CLASS_CODE	CHAR	319	3	
25	PROV_CLASS2_CODE	CHAR	322	3	
26	PROV_CLASS3_CODE	CHAR	325	8	
27	PROV_CLASS4_CODE	CHAR	333	8	
28	PROV_GRP01_CODE	CHAR	341	30	
29	PROV_NETWORK_CODE	CHAR	371	25	
30	NATIONAL_PROVIDER_ID	CHAR	396	8	

Provider Address Data

Field Num	Field	Type	Starting Position	Length	Notes
31	SEQUENCE_NUM	TINYINT	404	5	
32	ADDR_BEGIN_DATE	DATE	409	8	CCYYMMDD
33	ADDR_END_DATE	DATE	417	8	CCYYMMDD
34	STREET_ADDRESS1_NAME	CHAR	425	30	
35	STREET_ADDRESS2_NAME	CHAR	455	30	
36	STREET_ADDRESS3_NAME	CHAR	485	30	
37	CITY_NAME	CHAR	515	30	
38	STATE_CODE	CHAR	545	2	
39	ZIP_CODE	CHAR	547	9	
40	PROV_ADDRESS_CLASS_CODE	CHAR	556	2	
41	MCS_FILLER	CHAR	558	1	REQUIRED FIELD Must be = N

Inpatient Claims Extract

The extract must be formatted into **two extract files** – inpatient header (named std_inp_claim_headers) and inpatient detail (named std_inp_claim_lines) utilizing the following guidelines and written in the following file layout:

- Must extract inpatient claim header information along with line/service data. Each inpatient claim header must have at least one corresponding line/service record.
- ICD-9 procedure codes must be passed **with** a decimal.
- ICD-9 diagnosis codes may be passed with or without a decimal, the reformat program will add decimals if none are sent.
- Must extract claim adjustments as specified during mapping sessions. Legacy_Original_Claim_ID is only populated on adjustment claims. This indicates that the claim is and adjustment and not an original claim. The Legacy_Adj_Seq_Num must also be populated on adjustment claims and needs to be in sync between the header and ALL LINES on the detail file. The Legacy_Adj_Seq_Num is iterated for each adjustment if there is a chance that more than one adjustment may be present in a given extract. For instance, it should be 01 the first time the claim is adjusted and 02 the second time. Also, remember to populate the MCS Filler fields with "N"s on adjustments and voids.
- **NOTE** – Claims can contain only 127 claim lines or less. Any claims with more than 127 lines will be rejected during reformat.

Inpatient Claims Header

Field Num	Field	Type	Starting Position	Length	Notes
1	LEGACY_CLAIM_ID	CHAR	1	23	REQUIRED FIELD
2	LEGACY_SOURCE_CODE	CHAR	24	5	REQUIRED FIELD
3	LEGACY_ORIGINAL_CLAIM_ID	CHAR	29	23	☆REQ FOR ADJUSTMENTS see notes above
4	LEGACY_ADJ_SEQ_NUM	NUMERIC	52	8	☆REQ FOR ADJUSTMENTS see notes above
5	LEGACY_MEMBER_ID	CHAR	60	45	REQUIRED FIELD
6	LEGACY_PRODUCT_ID	CHAR	105	35	REQUIRED FIELD
7	LEGACY_CLIENT_CONTRACT_ID	CHAR	140	40	REQUIRED FIELD
8	LEGACY_BILLING_PROV_ID	CHAR	180	41	REQUIRED FIELD
9	LEGACY_PERFORM_PROV_ID	CHAR	221	41	REQUIRED FIELD
10	LEGACY_PCP_PROV_ID	CHAR	262	41	
11	LEGACY_REFERRING_PROV_ID	CHAR	303	41	
12	LEGACY_ATTENDING_PROV_ID	CHAR	344	41	
13	CLAIM_PAID_DATE	DATE	385	8	REQUIRED FIELD - CCYYMMDD
14	STMT_FROM_DATE	DATE	393	8	REQUIRED FIELD - CCYYMMDD
15	STMT_THRU_DATE	DATE	401	8	REQUIRED FIELD - CCYYMMDD
16	ADMIT_DATE	DATE	409	8	REQUIRED FIELD -

Field Num	Field	Type	Starting Position	Length	Notes
					CCYYMMDD
17	DISCHARGE_DATE	DATE	417	8	REQUIRED FIELD - CCYYMMDD
18	CLAIM_RECEIVED_DATE	DATE	425	8	CCYYMMDD
19	CLAIM_PROCESSED_DATE	DATE	433	8	CCYYMMDD
20	PRINCIPAL_PROC_CODE	CHAR	441	6	
21	PRINCIPAL_PROC_CODE_DATE	DATE	447	8	CCYYMMDD
22	OTHER_PROC1_CODE	CHAR	455	6	
23	OTHER_PROC1_DATE	DATE	461	8	CCYYMMDD
24	OTHER_PROC2_CODE	CHAR	469	6	
25	OTHER_PROC2_DATE	DATE	475	8	CCYYMMDD
26	OTHER_PROC3_CODE	CHAR	483	6	
27	OTHER_PROC3_DATE	DATE	489	8	CCYYMMDD
28	OTHER_PROC4_CODE	CHAR	497	6	
29	OTHER_PROC4_DATE	DATE	503	8	CCYYMMDD
30	OTHER_PROC5_CODE	CHAR	511	6	
31	OTHER_PROC5_DATE	DATE	517	8	CCYYMMDD
32	ADMIT_DIAG_CODE	CHAR	525	7	
33	PRINCIPAL_DIAG_CODE	CHAR	532	7	REQUIRED FIELD
34	SECONDARY_DIAG1_CODE	CHAR	539	7	
35	SECONDARY_DIAG2_CODE	CHAR	546	7	
36	SECONDARY_DIAG3_CODE	CHAR	553	7	
37	SECONDARY_DIAG4_CODE	CHAR	560	7	
38	SECONDARY_DIAG5_CODE	CHAR	567	7	
39	SECONDARY_DIAG6_CODE	CHAR	574	7	
40	SECONDARY_DIAG7_CODE	CHAR	581	7	
41	SECONDARY_DIAG8_CODE	CHAR	588	7	
42	SECONDARY_DIAG9_CODE	CHAR	595	7	
43	SECONDARY_DIAG10_CODE	CHAR	602	7	
44	LEGACY_DRG_CODE	CHAR	609	4	
45	LEGACY_DRG_MDC_CODE	CHAR	613	2	
46	LEGACY_APDRG_CODE	CHAR	615	4	
47	LEGACY_APDRG_MDC_CODE	CHAR	619	2	
48	ADMIT_SOURCE_CODE	CHAR	621	2	
49	ADMIT_TYPE_CODE	CHAR	623	8	
50	BILL_STATUS_CODE	CHAR	631	1	
51	DISCHARGE_STATUS_CODE	CHAR	632	2	
52	INSURER_COB_CODE	CHAR	634	1	
53	PLACE_OF_SERV_CODE	CHAR	635	2	
54	REIM_TYPE_CODE	CHAR	637	5	
55	TYPE_OF_BILL_CODE	CHAR	642	3	
56	CATEGORY_OF_SERV_CODE	CHAR	645	14	REQUIRED FIELD
57	CLASS_OF_SERV_CODE	CHAR	659	3	
58	CLASS_OF_SERV2_CODE	CHAR	662	3	
59	CLASS_OF_SERV3_CODE	CHAR	665	8	
60	ELIG_CODE	CHAR	673	3	
61	REASON_CLASS_CODE	CHAR	676	17	
62	BIRTHWEIGHT_CODE	TINYINT	693	5	Maximum value = 127
63	ZIP_CODE	CHAR	698	9	
64	ALT_ZIP_CODE	CHAR	707	9	

Field Num	Field	Type	Starting Position	Length	Notes
65	BENEFIT_CODE	CHAR	716	10	
66	NETWORK_IND	CHAR	726	1	
67	PROV_CAPITATION_IND	CHAR	727	1	
68	PRE_AUTH_REQUIRED_IND	CHAR	728	1	
69	LEGACY_PRE_AUTH_ID	CHAR	729	15	
70	SUBMITTED_AMT	NUMERIC	744	S 7.2 (10)	PIC S9(7)V9(2) SIGN LEADING SEPARATE Field must have positive or negative sign in left-most byte. No decimal points or commas. If data not available, send 0s with leading sign instead of blanks Example: '+000010000' = $100.00.
71	ALLOWED_AMT	NUMERIC	754	S 7.2 (10)	PIC S9(7)V9(2) SIGN LEADING SEPARATE
72	PAID_AMT	NUMERIC	764	S 7.2 (10)	PIC S9(7)V9(2) SIGN LEADING SEPARATE
73	COST_EQUIV_AMT	NUMERIC	774	S 7.2 (10)	PIC S9(7)V9(2) SIGN LEADING SEPARATE
74	ELIGIBLE_AMT	NUMERIC	784	S 7.2 (10)	PIC S9(7)V9(2) SIGN LEADING SEPARATE
75	NONCOVERED_AMT	NUMERIC	794	S 7.2 (10)	PIC S9(7)V9(2) SIGN LEADING SEPARATE
76	DENIED_AMT	NUMERIC	804	S 7.2 (10)	PIC S9(7)V9(2) SIGN LEADING SEPARATE
77	DEDUCTIBLE_AMT	NUMERIC	814	S 7.2 (10)	PIC S9(7)V9(2) SIGN LEADING SEPARATE
78	COPAY_AMT	NUMERIC	824	S 7.2 (10)	PIC S9(7)V9(2) SIGN LEADING SEPARATE
79	COINSURANCE_AMT	NUMERIC	834	S 7.2 (10)	PIC S9(7)V9(2) SIGN LEADING SEPARATE
80	COB_AMT	NUMERIC	844	S 7.2 (10)	PIC S9(7)V9(2) SIGN LEADING SEPARATE
81	COB_CODE	CHAR	854	2	
82	DISCOUNT_AMT	NUMERIC	856	S 7.2 (10)	PIC S9(7)V9(2) SIGN LEADING SEPARATE

Field Num	Field	Type	Starting Position	Length	Notes
83	DISCOUNT_CODE	CHAR	866	2	
84	WITHHOLD_AMT	NUMERIC	868	S 7.2 (10)	PIC S9(7)V9(2) SIGN LEADING SEPARATE
85	FEE_FOR_SERV_EQUIV_AMT	NUMERIC	878	S 7.2 (10)	PIC S9(7)V9(2) SIGN LEADING SEPARATE
86	GENERIC01_AMT	NUMERIC	888	S 7.2 (10)	PIC S9(7)V9(2) SIGN LEADING SEPARATE
87	GENERIC02_AMT	NUMERIC	898	S 7.2 (10)	PIC S9(7)V9(2) SIGN LEADING SEPARATE
88	GENERIC03_AMT	NUMERIC	908	S 7.2 (10)	PIC S9(7)V9(2) SIGN LEADING SEPARATE
89	GENERIC04_AMT	NUMERIC	918	S 7.2 (10)	PIC S9(7)V9(2) SIGN LEADING SEPARATE
90	GENERIC04_CODE	CHAR	928	2	
91	GENERIC05_AMT	NUMERIC	930	S 7.2 (10)	PIC S9(7)V9(2) SIGN LEADING SEPARATE
92	GENERIC05_CODE	CHAR	940	2	
93	GENERIC06_AMT	NUMERIC	942	S 7.2 (10)	PIC S9(7)V9(2) SIGN LEADING SEPARATE
94	GENERIC06_CODE	CHAR	952	2	
95	GENERIC07_AMT	NUMERIC	954	S 7.2 (10)	PIC S9(7)V9(2) SIGN LEADING SEPARATE
96	GENERIC07_CODE	CHAR	964	8	
97	L ATTEN PROV RI SW	CHAR	972	1	REQUIRED FIELD Must be = N
98	L BILLING PROV RI SW	CHAR	973	1	REQUIRED FIELD Must be = N
99	L PCP PROV RI SW	CHAR	974	1	REQUIRED FIELD Must be = N
100	L PERFORM PROV RI SW	CHAR	975	1	REQUIRED FIELD Must be = N
101	L REFERRING PROV RI SW	CHAR	976	1	REQUIRED FIELD Must be = N
102	L MEMBER RI SW	CHAR	977	1	REQUIRED FIELD Must be = N
103	L PRODUCT RI SW	CHAR	978	1	REQUIRED FIELD Must be = N
104	L CLIENT CONTRACT RI SW	CHAR	979	1	REQUIRED FIELD Must be = N
105	MCS FILLER	CHAR	980	3	REQUIRED FIELD Must be = NNN

Inpatient Revenue Lines Detail

Field Num	Field	Type	Starting Position	Length	Notes
1	LEGACY_CLAIM_ID	CHAR	1	23	REQUIRED FIELD
2	LEGACY_MEMBER_ID	CHAR	24	45	REQUIRED FIELD
3	LEGACY_LINE_ID	TINYINT	69	5	REQUIRED FIELD Maximum value = 127
4	LEGACY_ADJ_SEQ_NUM	NUMERIC	74	8	☆REQ FOR ADJUSTMENTS see notes above
5	DETAIL_PROC_CODE	CHAR	82	6	
6	PROC_MODIFIER1_CODE	CHAR	88	2	
7	PROC_MODIFIER2_CODE	CHAR	90	2	
8	NONCOVERED_UNIT_NUM	NUMERIC	92	S6.2 (9)	PIC S9(6)V9(2) SIGN LEADING SEPARATE Field must have positive or negative sign in left-most byte. No decimal points or commas. If data not available, send 0s with leading sign instead of blanks Example: '+00010000' = $100.00
9	REVENUE_CODE	CHAR	101	5	For industry standard revenue codes, 1st position must be a '0'. Last position must be blank. The middle 3 positions must be the revenue code. Example: if revenue code is '123', send '0123 ' (last position is blank). For local revenue codes, any 5 alphanumeric characters are fine as long as they are added to the revenue code table or ARG is turned on.
10	UNIT_REVENUE_NUM	NUMERIC	106	S6.2 (9)	PIC S9(6)V9(2) SIGN LEADING SEPARATE Field must have positive or negative sign in left-most byte. No decimal points or commas. If data not available, send 0s with leading sign instead of blanks Example: '+00010000' = $100.00
11	REASON_CLASS_CODE	CHAR	115	17	
12	REIM_TYPE_CODE	CHAR	132	5	
13	CARVE_OUT_IND	CHAR	137	1	

Field Num	Field	Type	Starting Position	Length	Notes
14	SUBMITTED_AMT	NUMERIC	138	S 7.2 (10)	PIC S9(7)V9(2) SIGN LEADING SEPARATE Field must have positive or negative sign in left-most byte. No decimal points or commas. If data not available, send 0s with leading sign instead of blanks Example: '+000010000' = $100.00.
15	ALLOWED_AMT	NUMERIC	148	S 7.2 (10)	PIC S9(7)V9(2) SIGN LEADING SEPARATE
16	PAID_AMT	NUMERIC	158	S 7.2 (10)	PIC S9(7)V9(2) SIGN LEADING SEPARATE
17	COST_EQUIV_AMT	NUMERIC	168	S 7.2 (10)	PIC S9(7)V9(2) SIGN LEADING SEPARATE
18	ELIGIBLE_AMT	NUMERIC	178	S 7.2 (10)	PIC S9(7)V9(2) SIGN LEADING SEPARATE
19	NONCOVERED_AMT	NUMERIC	188	S 7.2 (10)	PIC S9(7)V9(2) SIGN LEADING SEPARATE
20	DENIED_AMT	NUMERIC	198	S 7.2 (10)	PIC S9(7)V9(2) SIGN LEADING SEPARATE
21	DEDUCTIBLE_AMT	NUMERIC	208	S 7.2 (10)	PIC S9(7)V9(2) SIGN LEADING SEPARATE
22	COPAY_AMT	NUMERIC	218	S 7.2 (10)	PIC S9(7)V9(2) SIGN LEADING SEPARATE
23	COINSURANCE_AMT	NUMERIC	228	S 7.2 (10)	PIC S9(7)V9(2) SIGN LEADING SEPARATE
24	COB_AMT	NUMERIC	238	S 7.2 (10)	PIC S9(7)V9(2) SIGN LEADING SEPARATE
25	COB_CODE	CHAR	248	2	
26	DISCOUNT_AMT	NUMERIC	250	S 7.2 (10)	PIC S9(7)V9(2) SIGN LEADING SEPARATE
27	DISCOUNT_CODE	CHAR	260	2	
28	WITHHOLD_AMT	NUMERIC	262	S 7.2 (10)	PIC S9(7)V9(2) SIGN LEADING SEPARATE
29	FEE_FOR_SERV_EQUIV_AMT	NUMERIC	272	S 7.2 (10)	PIC S9(7)V9(2) SIGN LEADING SEPARATE
30	REVENUE_RATE_AMT	NUMERIC	282	S 7.2 (10)	PIC S9(7)V9(2) SIGN LEADING SEPARATE
31	GENERIC01_AMT	NUMERIC	292	S 7.2 (10)	PIC S9(7)V9(2) SIGN LEADING SEPARATE
32	GENERIC02_AMT	NUMERIC	302	S 7.2 (10)	PIC S9(7)V9(2) SIGN LEADING SEPARATE
33	GENERIC03_AMT	NUMERIC	312	S 7.2 (10)	PIC S9(7)V9(2) SIGN LEADING SEPARATE
34	GENERIC04_AMT	NUMERIC	322	S 7.2 (10)	PIC S9(7)V9(2) SIGN LEADING SEPARATE
35	GENERIC04_CODE	CHAR	332	2	
36	GENERIC05_AMT	NUMERIC	334	S 7.2 (10)	PIC S9(7)V9(2) SIGN LEADING SEPARATE

Field Num	Field	Type	Starting Position	Length	Notes
37	GENERIC05_CODE	CHAR	344	2	
38	GENERIC06_AMT	NUMERIC	346	S 7.2 (10)	PIC S9(7)V9(2) SIGN LEADING SEPARATE
39	GENERIC06_CODE	CHAR	356	2	
40	GENERIC07_AMT	NUMERIC	358	S 7.2 (10)	PIC S9(7)V9(2) SIGN LEADING SEPARATE
41	GENERIC07_CODE	CHAR	368	8	
42	MCS_FILLER	CHAR	376	1	REQUIRED FIELD Must be = N

Professional and Other Outpatient Claims

The professional and other claims extract consists of one record per service line for ambulatory claims. The extract must be formatted into **one extract file** (named std_pfo_claims) utilizing the following guidelines and written in the following file layout:

- ICD-9 procedure codes must be passed **with** a decimal.
- ICD-9 diagnosis codes may be passed with or without a decimal, the reformat program will add decimals if none are sent.
- Must extract claim adjustments as specified during mapping sessions. Legacy_Original_Claim_ID is only populated on adjustment claims. This indicates that the claim is and adjustment and not an original claim. The Legacy_Adj_Seq_Num must also be populated on adjustment claims, and is iterated for each adjustment if there is a chance that more than one adjustment may be present in a given extract. For instance, it should be 01 the first time the claim is adjusted and 02 the second time. Also, remember to populate the MCS Filler fields with "N"s on adjustments and voids.
- **NOTE** – Claims can contain only 127 claim lines or less. Any claims with more than 127 lines will be rejected during reformat.

Field Num	Field	Type	Starting Position	Length	Notes
1	LEGACY_CLAIM_ID	CHAR	1	23	REQUIRED FIELD
2	LEGACY_LINE_ID	TINYINT	24	5	REQUIRED FIELD Maximum value = 127
3	LEGACY_SOURCE_CODE	CHAR	29	5	REQUIRED FIELD
4	LEGACY_ORIGINAL_CLAIM_ID	CHAR	34	23	☆REQ FOR ADJUSTMENTS see notes above
5	LEGACY_ADJ_SEQ_NUM	NUMERIC	57	8	☆REQ FOR ADJUSTMENTS see notes above
6	LEGACY_MEMBER_ID	CHAR	65	45	REQUIRED FIELD
7	LEGACY_PRODUCT_ID	CHAR	110	35	REQUIRED FIELD
8	LEGACY_CLIENT_CONTRACT_ID	CHAR	145	40	REQUIRED FIELD
9	LEGACY_BILLING_PROV_ID	CHAR	185	41	
10	LEGACY_PERFORM_PROV_ID	CHAR	226	41	REQUIRED FIELD
11	LEGACY_PCP_PROV_ID	CHAR	267	41	
12	LEGACY_REFERRING_PROV_ID	CHAR	308	41	
13	CLAIM_PAID_DATE	DATE	349	8	REQUIRED FIELD - CCYYMMDD
14	FROM_DATE	DATE	357	8	REQUIRED FIELD - CCYYMMDD
15	THRU_DATE	DATE	365	8	REQUIRED FIELD - CCYYMMDD
16	CLAIM_RECEIVED_DATE	DATE	373	8	CCYYMMDD
17	CLAIM_PROCESSED_DATE	DATE	381	8	CCYYMMDD
18	HCPCS_PROC_CODE	CHAR	389	6	
19	BILL_PROC_CODE	CHAR	395	6	
20	PROC_MODIFIER1_CODE	CHAR	401	2	
21	PROC_MODIFIER2_CODE	CHAR	403	2	
22	UNIT_NUM	NUMERIC	405	S6.2 (9)	PIC S9(6)V9(2) SIGN LEADING SEPARATE Field must have positive or negative sign in left-most byte.

Field Num	Field	Type	Starting Position	Length	Notes
					No decimal points or commas. If data not available, send 0s with leading sign instead of blanks Example: '+00010000' = $100.00
23	NONCOVERED_UNIT_NUM	NUMERIC	414	S6.2 (9)	PIC S9(7)V9(2) SIGN LEADING SEPARATE
24	PRINCIPAL_DIAG_CODE	CHAR	423	7	May be passed with or without a decimal
25	SECONDARY_DIAG1_CODE	CHAR	430	7	May be passed with or without a decimal
26	SECONDARY_DIAG2_CODE	CHAR	437	7	May be passed with or without a decimal
27	SECONDARY_DIAG3_CODE	CHAR	444	7	May be passed with or without a decimal
28	REVENUE_CODE	CHAR	451	5	1st position must be a '0'. Last position must be blank. The middle 3 positions must be the revenue code. Example: if revenue code is '123', send '0123 ' (last position is blank)
29	INSURER_COB_CODE	CHAR	456	1	
30	PLACE_OF_SERV_CODE	CHAR	457	2	
31	REIM_TYPE_CODE	CHAR	459	5	
32	CATEGORY_OF_SERV_CODE	CHAR	464	14	REQUIRED FIELD
33	CLASS_OF_SERV_CODE	CHAR	478	3	
34	CLASS_OF_SERV2_CODE	CHAR	481	3	
35	CLASS_OF_SERV3_CODE	CHAR	484	8	
36	ELIG_CODE	CHAR	492	3	
37	REASON_CLASS_CODE	CHAR	495	17	
38	ZIP_CODE	CHAR	512	9	
39	ALT_ZIP_CODE	CHAR	521	9	
40	BENEFIT_CODE	CHAR	530	10	
41	NETWORK_IND	CHAR	540	1	
42	PROV_CAPITATION_IND	CHAR	541	1	
43	CARVE_OUT_IND	CHAR	542	1	
44	PRE_AUTH_REQUIRED_IND	CHAR	543	1	
45	LEGACY_PRE_AUTH_ID	CHAR	544	15	
46	SUBMITTED_AMT	NUMERIC	559	S 7.2 (10)	PIC S9(7)V9(2) SIGN LEADING SEPARATE Field must have positive or negative sign in left-most byte. No decimal points or commas. If data not available, send 0s with leading sign instead of blanks Example: '+000010000' = $100.00.
47	ALLOWED_AMT	NUMERIC	569	S 7.2 (10)	PIC S9(7)V9(2) SIGN LEADING SEPARATE
48	PAID_AMT	NUMERIC	579	S 7.2 (10)	PIC S9(7)V9(2) SIGN LEADING SEPARATE

Field Num	Field	Type	Starting Position	Length	Notes
49	COST_EQUIV_AMT	NUMERIC	589	S 7.2 (10)	PIC S9(7)V9(2) SIGN LEADING SEPARATE
50	ELIGIBLE_AMT	NUMERIC	599	S 7.2 (10)	PIC S9(7)V9(2) SIGN LEADING SEPARATE
51	NONCOVERED_AMT	NUMERIC	609	S 7.2 (10)	PIC S9(7)V9(2) SIGN LEADING SEPARATE
52	DENIED_AMT	NUMERIC	619	S 7.2 (10)	PIC S9(7)V9(2) SIGN LEADING SEPARATE
53	DEDUCTIBLE_AMT	NUMERIC	629	S 7.2 (10)	PIC S9(7)V9(2) SIGN LEADING SEPARATE
54	COPAY_AMT	NUMERIC	639	S 7.2 (10)	PIC S9(7)V9(2) SIGN LEADING SEPARATE
55	COINSURANCE_AMT	NUMERIC	649	S 7.2 (10)	PIC S9(7)V9(2) SIGN LEADING SEPARATE
56	COB_AMT	NUMERIC	659	S 7.2 (10)	PIC S9(7)V9(2) SIGN LEADING SEPARATE
57	COB_CODE	CHAR	669	2	
58	DISCOUNT_AMT	NUMERIC	671	S 7.2 (10)	PIC S9(7)V9(2) SIGN LEADING SEPARATE
59	DISCOUNT_CODE	CHAR	681	2	
60	WITHHOLD_AMT	NUMERIC	683	S 7.2 (10)	PIC S9(7)V9(2) SIGN LEADING SEPARATE
61	FEE_FOR_SERV_EQUIV_AMT	NUMERIC	693	S 7.2 (10)	PIC S9(7)V9(2) SIGN LEADING SEPARATE
62	GENERIC01_AMT	NUMERIC	703	S 7.2 (10)	PIC S9(7)V9(2) SIGN LEADING SEPARATE
63	GENERIC02_AMT	NUMERIC	713	S 7.2 (10)	PIC S9(7)V9(2) SIGN LEADING SEPARATE
64	GENERIC03_AMT	NUMERIC	723	S 7.2 (10)	PIC S9(7)V9(2) SIGN LEADING SEPARATE
65	GENERIC04_AMT	NUMERIC	733	S 7.2 (10)	PIC S9(7)V9(2) SIGN LEADING SEPARATE
66	GENERIC04_CODE	CHAR	743	2	
67	GENERIC05_AMT	NUMERIC	745	S 7.2 (10)	PIC S9(7)V9(2) SIGN LEADING SEPARATE
68	GENERIC05_CODE	CHAR	755	2	
69	GENERIC06_AMT	NUMERIC	757	S 7.2 (10)	PIC S9(7)V9(2) SIGN LEADING SEPARATE
70	GENERIC06_CODE	CHAR	767	2	
71	GENERIC07_AMT	NUMERIC	769	S 7.2 (10)	PIC S9(7)V9(2) SIGN LEADING SEPARATE
72	GENERIC07_CODE	CHAR	779	8	
73	L MEMBER RI SW	CHAR	787	1	REQUIRED FIELD Must be = N
74	L BILLING PROV RI SW	CHAR	788	1	REQUIRED FIELD Must be = N
75	L PERFORM PROV RI SW	CHAR	789	1	REQUIRED FIELD Must be = N
76	L PCP PROV RI SW	CHAR	790	1	REQUIRED FIELD Must be = N
77	L REFERRING PROV RI SW	CHAR	791	1	REQUIRED FIELD Must be = N
78	L PRODUCT RI SW	CHAR	792	1	REQUIRED FIELD Must be = N
79	L CLIENT CONTRACT RI SW	CHAR	793	1	REQUIRED FIELD Must be = N
80	MCS FILLER	CHAR	794	3	REQUIRED FIELD Must be = NNN

Pharmacy Claim

The pharmacy claims extract consists of one record per service line for pharmaceutical claims. The extract must be formatted into **one extract file** (named std_pharm_claims) utilizing the following guidelines and written in the following file layout:

- ICD-9 diagnosis codes may be passed with or without a decimal, the reformat program will add decimals if none are sent.

- Must extract claim adjustments as specified during mapping sessions. Legacy_Original_Claim_ID is only populated on adjustment claims. This indicates that the claim is and adjustment and not an original claim. The Legacy_Adj_Seq_Num must also be populated on adjustment claims, and is iterated for each adjustment if there is a chance that more than one adjustment may be present in a given extract. For instance, it should be 01 the first time the claim is adjusted and 02 the second time. Also, remember to populate the MCS Filler fields with "N"s on adjustments and voids.

Field Num	Field	Type	Starting Position	Length	Notes
1	LEGACY_CLAIM_ID	CHAR	1	23	REQUIRED FIELD
2	LEGACY_LINE_ID	SMALLINT	24	5	REQUIRED FIELD Maximum value = 127
3	LEGACY_SOURCE_CODE	CHAR	29	5	REQUIRED FIELD
4	LEGACY_ORIGINAL_CLAIM_ID	CHAR	34	23	☆REQ FOR ADJUSTMENTS see notes above
5	LEGACY_ADJ_SEQ_NUM	NUMERIC	57	8	☆REQ FOR ADJUSTMENTS see notes above
6	LEGACY_MEMBER_ID	CHAR	65	45	REQUIRED FIELD
7	LEGACY_PRODUCT_ID	CHAR	110	35	REQUIRED FIELD
8	LEGACY_CLIENT_CONTRACT_ID	CHAR	145	40	REQUIRED FIELD
9	LEGACY_BILLING_PROV_ID	CHAR	185	41	
10	LEGACY_PERFORM_PROV_ID	CHAR	226	41	REQUIRED FIELD
11	LEGACY_PCP_PROV_ID	CHAR	267	41	
12	LEGACY_PRESCRIBING_PROV_ID	CHAR	308	41	
13	CLAIM_PAID_DATE	DATE	349	8	CCYYMMDD
14	CLAIM_RECEIVED_DATE	DATE	357	8	CCYYMMDD
15	CLAIM_PROCESSED_DATE	DATE	365	8	CCYYMMDD
16	PRINCIPAL_DIAG_CODE	CHAR	373	7	May be passed with or without decimal, if available
17	INSURER_COB_CODE	CHAR	380	1	
18	PLACE_OF_SERV_CODE	CHAR	381	2	
19	REIM_TYPE_CODE	CHAR	383	5	
20	CATEGORY_OF_SERV_CODE	CHAR	388	14	
21	CLASS_OF_SERV_CODE	CHAR	402	3	
22	CLASS_OF_SERV2_CODE	CHAR	405	3	
23	CLASS_OF_SERV3_CODE	CHAR	408	8	
24	ELIG_CODE	CHAR	416	3	
25	REASON_CLASS_CODE	CHAR	419	17	
26	ZIP_CODE	CHAR	436	9	
27	ALT_ZIP_CODE	CHAR	445	9	
28	BENEFIT_CODE	CHAR	454	10	
29	NETWORK_IND	CHAR	464	1	

Field Num	Field	Type	Starting Position	Length	Notes
30	PROV_CAPITATION_IND	CHAR	465	1	
31	CARVE_OUT_IND	CHAR	466	1	
32	PRE_AUTH_REQUIRED_IND	CHAR	467	1	
33	LEGACY_PRE_AUTH_ID	CHAR	468	15	
34	SUBMITTED_AMT	NUMERIC	483	S 7.2 (10)	PIC S9(7)V9(2) SIGN LEADING SEPARATE Field must have positive or negative sign in left-most byte. No decimal points or commas. If data not available, send 0s with leading sign instead of blanks Example: '+000010000' = $100.00.
35	ALLOWED_AMT	NUMERIC	493	S 7.2 (10)	PIC S9(7)V9(2) SIGN LEADING SEPARATE
36	PAID_AMT	NUMERIC	503	S 7.2 (10)	PIC S9(7)V9(2) SIGN LEADING SEPARATE
37	COST_EQUIV_AMT	NUMERIC	513	S 7.2 (10)	PIC S9(7)V9(2) SIGN LEADING SEPARATE
38	ELIGIBLE_AMT	NUMERIC	523	S 7.2 (10)	PIC S9(7)V9(2) SIGN LEADING SEPARATE
39	NONCOVERED_AMT	NUMERIC	533	S 7.2 (10)	PIC S9(7)V9(2) SIGN LEADING SEPARATE
40	DENIED_AMT	NUMERIC	543	S 7.2 (10)	PIC S9(7)V9(2) SIGN LEADING SEPARATE
41	DEDUCTIBLE_AMT	NUMERIC	553	S 7.2 (10)	PIC S9(7)V9(2) SIGN LEADING SEPARATE
42	COPAY_AMT	NUMERIC	563	S 7.2 (10)	PIC S9(7)V9(2) SIGN LEADING SEPARATE
43	COINSURANCE_AMT	NUMERIC	573	S 7.2 (10)	PIC S9(7)V9(2) SIGN LEADING SEPARATE
44	COB_AMT	NUMERIC	583	S 7.2 (10)	PIC S9(7)V9(2) SIGN LEADING SEPARATE
45	COB_CODE	CHAR	593	2	
46	DISCOUNT_AMT	NUMERIC	595	S 7.2 (10)	PIC S9(7)V9(2) SIGN LEADING SEPARATE
47	DISCOUNT_CODE	CHAR	605	2	
48	WITHHOLD_AMT	NUMERIC	607	S 7.2 (10)	PIC S9(7)V9(2) SIGN LEADING SEPARATE
49	FEE_FOR_SERV_EQUIV_AMT	NUMERIC	617	S 7.2 (10)	PIC S9(7)V9(2) SIGN LEADING SEPARATE
50	GENERIC01_AMT	NUMERIC	627	S 7.2 (10)	PIC S9(7)V9(2) SIGN LEADING SEPARATE
51	GENERIC02_AMT	NUMERIC	637	S 7.2 (10)	PIC S9(7)V9(2) SIGN LEADING SEPARATE
52	GENERIC03_AMT	NUMERIC	647	S 7.2 (10)	PIC S9(7)V9(2) SIGN LEADING SEPARATE
53	GENERIC04_AMT	NUMERIC	657	S 7.2 (10)	PIC S9(7)V9(2) SIGN LEADING SEPARATE

Field Num	Field	Type	Starting Position	Length	Notes
54	GENERIC04_CODE	CHAR	667	2	
55	GENERIC05_AMT	NUMERIC	669	S 7.2 (10)	PIC S9(7)V9(2) SIGN LEADING SEPARATE
56	GENERIC05_CODE	CHAR	679	2	
57	GENERIC06_AMT	NUMERIC	681	S 7.2 (10)	PIC S9(7)V9(2) SIGN LEADING SEPARATE
58	GENERIC06_CODE	CHAR	691	2	
59	GENERIC07_AMT	NUMERIC	693	S 7.2 (10)	PIC S9(7)V9(2) SIGN LEADING SEPARATE
60	GENERIC07_CODE	CHAR	703	8	
61	PRESCRIPTION_ID	CHAR	711	10	
62	PRESCRIPTION_DATE	DATE	721	8	CCYYMMDD
63	PRESCRIPTION_FILLED_DATE	DATE	729	8	REQUIRED FIELD - CCYYMMDD
64	NDC_CODE	CHAR	737	11	REQUIRED FIELD
65	DAW_CODE	CHAR	748	2	
66	METRIC_UNIT_NUM	SMALLINT	750	5	Maximum value = 32767
67	NONMETRIC_UNIT_NUM	SMALLINT	755	5	Maximum value = 32767
68	ALLOWED_REFILLS_NUM	SMALLINT	760	5	Maximum value = 127
69	FILLED_REFILLS_NUM	SMALLINT	765	5	Maximum value = 127
70	SUPPLY_DAYS_NUM	SMALLINT	770	5	Maximum value = 32767
71	INGREDIENT_AMT	NUMERIC	775	S 7.2 (10)	PIC S9(7)V9(2) SIGN LEADING SEPARATE Field must have positive or negative sign in left-most byte. No decimal points or commas. If data not available, send 0s with leading sign instead of blanks Example: '+000010000' = $100.00.
72	DISPENSED_FEE_AMT	NUMERIC	785	S 7.2 (10)	PIC S9(7)V9(2) SIGN LEADING SEPARATE
73	REBATE_AMT	NUMERIC	795	S 7.2 (10)	PIC S9(7)V9(2) SIGN LEADING SEPARATE
74	METRIC_DRUG_UNIT_PRICE	NUMERIC	805	S4.5 (10)	PIC S9(4)V9(5) No decimal points or commas. If data not available, send 0s Example: '+001234500' = 12345.00
75	NONMETRIC_DRUG_UNIT_PRICE	NUMERIC	815	S4.5 (10)	PIC S9(4)V9(5)
76	FORMULARY_IND	CHAR	825	1	
77	PHARM_BENEFIT_IND	CHAR	826	1	
78	SVC_GENERIC_IND	CHAR	827	1	
79	SVC_MULTI_SOURCE_IND	CHAR	828	1	
80	L MEMBER RI SW	CHAR	829	1	REQUIRED FIELD Must be = N
81	L BILLING PROV RI SW	CHAR	830	1	REQUIRED FIELD Must be = N
82	L PERFOR PROV RI SW	CHAR	831	1	REQUIRED FIELD

Field Num	Field	Type	Starting Position	Length	Notes
					Must be = N
83	L PCP PROV RI SW	CHAR	832	1	REQUIRED FIELD Must be = N
84	L PRESCRIBING PROV RI SW	CHAR	833	1	REQUIRED FIELD Must be = N
85	L PRODUCT RI SW	CHAR	834	1	REQUIRED FIELD Must be = N
86	L CLIENT CONTRACT RI SW	CHAR	835	1	REQUIRED FIELD Must be = N
87	MCS FILLER	CHAR	836	3	REQUIRED FIELD Must be = NNN

Observation Extract (optional)

The observation extract typically consists of one record per observation, but note that tests like blood pressure which have two measurements are still considered one observation.

The extract must be formatted into **one extract file** (named std_observation) utilizing the following guidelines and written in the following file layout:

- ICD-9 procedure codes must be passed **with** a decimal.
- ICD-9 diagnosis codes may be passed with or without a decimal, the reformat program will add decimals if none are sent.

Note that Observations are setup to TMU load modify in DI. This means that if the same Observation ID is submitted to the warehouse a second time the original record will be replaced by the new record.

Field Num	Field	Type	Starting Position	Length	Notes
1	LEGACY_OBSERVATION_ID	CHAR	1	30	REQUIRED FIELD
2	LEGACY_MEMBER_ID	CHAR	31	45	REQUIRED FIELD
3	LEGACY_PRODUCT_ID	CHAR	76	35	REQUIRED FIELD
4	LEGACY_CLIENT_CONTRACT_ID	CHAR	111	40	REQUIRED FIELD
5	LEGACY_PCP_PROV_ID	CHAR	151	41	
6	LEGACY_REFERRING_PROV_ID	CHAR	192	41	
7	LEGACY_PERFORMING_PROV_ID	CHAR	233	41	
8	LEGACY_BILLING_PROV_ID	CHAR	274	41	
9	OBSERVATION_SOURCE_CODE	CHAR	315	2	REQUIRED FIELD
10	FROM_DATE	DATE	317	8	CCYYMMDD
11	THRU_DATE	DATE	325	8	REQUIRED FIELD - CCYYMMDD
12	PRINCIPAL_DIAG_CODE	CHAR	333	7	
13	SECONDARY_DIAG1_CODE	CHAR	340	7	
14	SECONDARY_DIAG2_CODE	CHAR	347	7	
15	SECONDARY_DIAG3_CODE	CHAR	354	7	
16	HCPCS_PROC_CODE	CHAR	361	6	
17	REVENUE_CODE	CHAR	367	5	
18	OBSERVATION_CODE	CHAR	372	10	REQUIRED FIELD
19	OBSERV_COND_GRP_CODE	CHAR	382	20	
20	NUMER1_RESULTS_VAL	NUMERIC	402	S 5.5(11)	PIC S9(5)V9(05) SIGN LEADING SEPARATE.
21	NUMER1_RESULTS_MEASUREMENT	CHAR	413	10	
22	NUMER2_RESULTS_VAL	NUMERIC	423	S 5.5 (11)	PIC S9(5)V9(05) SIGN LEADING SEPARATE.
23	NUMER2_RESULTS_MEASUREMENT	CHAR	434	10	
24	TEXT_RESULTS_TEXT	CHAR	444	10	
25	TEXT_OBSERV_RESULTS_CODE	CHAR	454	20	
26	MISC_TEXT	CHAR	474	10	
27	MISC_TEXT2	CHAR	484	6	
28	OBSERV_CLASS_CODE	CHAR	490	1	
29	L_MEMBER_RI_SW	CHAR	491	1	REQUIRED FIELD Must be = N

Field Num	Field	Type	Starting Position	Length	Notes
30	L_PRODUCT_RI_SW	CHAR	492	1	REQUIRED FIELD Must be = N
31	L_CLIENT_CONTRACT_RI_SW	CHAR	493	1	REQUIRED FIELD Must be = N
32	L_PCP_PROV_RI_SW	CHAR	494	1	REQUIRED FIELD Must be = N
33	L_PERFORM_PROV_RI_SW	CHAR	495	1	REQUIRED FIELD Must be = N
34	L_REFERRING_PROV_RI_SW	CHAR	496	1	REQUIRED FIELD Must be = N
35	L_BILLING_PROV_RI_SW	CHAR	497	1	REQUIRED FIELD Must be = N
36	MCS_FILLER	CHAR	498	5	REQUIRED FIELD Must be = NNNNN

HSI Trans (optional)

HSI Trans is an optional extract for populating customer-defined health status codes and/or the MCSource-defined health status indicators, such as asthma and diabetes. This extract feeds the HSI_Fact table in the MCSource data model. The HSI Trans extract typically consists of one record per member per HSI type code.

The extract must be formatted into **one extract file** (named hsi_trans) written in the following file layout:

Field Num	Field	Type	Starting Position	Length	Notes
1	LEGACY_MEMBER_ID	CHAR	1	45	REQUIRED FIELD
2	HSI_TYPE_CODE	CHAR	46	8	
3	HSI_CODE	CHAR	54	8	
4	SET_SOURCE_CODE	CHAR	62	8	
5	HSI_EARLIEST_DATE	DATE	70	8	CCYYMMDD
6	HSI_LATEST_DATE	DATE	78	8	CCYYMMDD
7	L_MEMBER_RI_SW	CHAR	86	1	REQUIRED FIELD Must be = N

Capitation (optional)

Capitation is an optional extract for tracking Financial Health. This extract feeds the Capitation_Fact table in the MCSource data model. The Capitaton extract typically consists of one record per member per Capitation Contract code.

The extract must be formatted into **one extract file** (named std_capitation) written in the following file layout:

Field Num	Field	Type	Starting Position	Length	Notes
1	LEGACY_MEMBER_ID	CHAR	1	45	REQUIRED FIELD
2	LEGACY_CLIENT_ CONTRACT_ID	CHAR	46	40	REQUIRED FIELD
3	LEGACY_PRODUCT_ID	CHAR	86	35	REQUIRED FIELD
4	CAPITATION_DATE	DATE	121	8	
5	LEGACY_PROV_ID	CHAR	129	41	REQUIRED FIELD
6	TYPE_OF_SERV_CODE	CHAR	170	5	
7	CAPITATION_CONTRACT _CODE	CHAR	175	10	
8	CAPITATION_BAND_ CODE	CHAR	185	10	
9	PAID_PERIOD_ID	INTEGER	195	10	FORMAT: 0000CCYYMM
10	CAPITATION_AMT	DECIMAL	205	S 4.2 (7)	PIC S9(4)V9(02) SIGN LEADING SEPARATE.
11	L_MEMBER_RI_SW	CHAR	212	1	“N”
12	L_PRODUCT_RI_SW	CHAR	213	1	“N”
13	L_CLIENT_CONTRACT_RI _SW	CHAR	214	1	“N”
14	L_PROV_RI_SW	CHAR	215	1	“N”

Client Contract Premium (optional)

Client Contract Premium is an optional extract for tracking Financial Health. This extract feeds the Client_Contract_Prem_Fact table in the MCSource data model. The Premium extract typically consists of one record per period, product, rating code, and client contract.

The extract must be formatted into **one extract file** (named std_client_contract_prem) written in the following file layout:

Field Num	Field	Type	Starting Position	Length	Notes
1	LEGACY_CLIENT_ CONTRACT_ID	CHAR	1	40	REQUIRED FIELD
2	LEGACY_PRODUCT_ID	CHAR	41	35	REQUIRED FIELD
3	RATING_CODE	CHAR	76	2	
4	END_PERIOD_ID	INTEGER	78	10	FORMAT: 0000CCYYMM
5	PAID_PERIOD_ID	INTEGER	88	10	" "
6	EMPLOYEE_PREMIUM_ AMT	DECIMAL	98	S 7.2 (10)	PIC S9(7)V9(02) SIGN LEADING SEPARATE
7	EMPLOYER_PREMIUM_ AMT	DECIMAL	108	S 7.2 (10)	PIC S9(7)V9(02) SIGN LEADING SEPARATE
8	EMPLOYEES_NUM	INTEGER	118	10	
9	MEMBER_NUM	INTEGER	128	10	
10	L_CLIENT_CONTRACT_ RI_SW	CHAR	138	1	"N"
11	L_PRODUCT_RI_SW	CHAR	139	1	"N"

NDC Extract (Optional)

The base NDC table available in MCSource contains the drug codes and related drug information obtained from a source called Multum. VIPS updates the NDC table once a month. If a customer uses another source (such as First Data Bank) for drug information, the customer has the option of creating an extract file to load to MCSource.

The NDC extract file should contain one record per NDC Code. There are two options for loading the file to MCSource: 1) It can be imported into the Access Codes database; or 2) It can be moved directly to the server. The advantage of importing the file to Access is consistency—all of the code tables are maintained in the Access Codes database. However, because of its size, including the NDC table in Access can slow down the "ODL" process, which takes the code tables from Access and prepares them for loading into the warehouse. For this reason, it may be preferable to move the NDC file directly to the server.

If the NDC file is imported into Access, the following guidelines apply:

- The file can be created as either a fixed-width or delimited flat file that can be imported into Access, such as a .txt file.

- Prior to loading the file to Access for the first time, the link to the table called "NDC" should be deleted from the database, and the **records** in the table called "NDC – Local" should be deleted (while the table itself, "NDC – Local", should remain). Also, the query called "NDC Query" should be deleted. In the Code_Group_Info table, for the row where Code_Group = NDC, the value in the column RI_Source should be changed from "NDC Query" to "NDC – Local".

- Prior to loading the file to Access each subsequent cycle, the **records** in the table called "NDC – Local" should be deleted (while the table itself, "NDC – Local", should remain). This assumes a full file replacement of the NDC table each cycle (as opposed to only loading updates to the table).

- When importing the NDC extract file into Access, append the file to the existing table "NDC – Local".

If moving the NDC extract file directly to the server, the extract can be created as either a fixed-width or a tilde (~) –delimited file, and the following guidelines apply:

- For a fixed-width file, the SCO parameter "ODL NDC" should be set to 1,modify,F.

- For a tilde-delimited file, the SCO parameter "ODL NDC" should be set to 1,modify,V (this is the default setting for this parameter). Also,

  - The first field does not begin with a tilde and the last field does not end with a tilde.

  - While the length of the fields may remain fixed-width (according to the file layout below), this is not a requirement.

- After the last byte of the last field, you need to terminate the line with an ASCII LF (Line Feed). The LF is equal to a hex '0A'. This might also be seen as '\n'.

- The file must be placed in the /mcsdata/ODL directory on the server and must be named "ndc.odl"

- Prior to performing ODL (the process which takes the code tables from Access and prepares them for loading into the warehouse), the following changes should be made to the Access Codes database:

  - The tables "NDC" and "NDC – Local" and the query "NDC Query" should be deleted.

  - For the row in the Code_Group_Info table where Code_Group = NDC: Delete the values from the RI_Source and RI_Field_Name columns (these cells should be left blank); deselect the RefInteg and the ExportFlag columns; and set NewCodeSelect and SpacesSelect to the desired values.

  The steps described in this bullet apply only to the first time the NDC extract file is placed on the server; it does not need to be repeated for subsequent cycles.

Please note that the optional NDC Extract is not subject to the Reformat processing that is applied to the Product, Client Contract, Member, Provider, Claim, and Observation extract files. Therefore, all effort should be made to ensure the NDC extract file is in the correct format before loading it to Access or placing it on the server. If desired, VIPS can review a test file.

Following is the file layout for the NDC extract. Please see the NDC Mapping Worksheet for detailed information on how to populate the fields.

Field Num	Field	Type	Starting Position	Length	Notes
1	NDC_CODE	CHAR	1	11	REQUIRED FIELD
2	NDC_TYPE_CODE	CHAR	12	3	
3	NDC_PRODCUT_CODE	CHAR	15	4	
4	NDC_PACK_CODE	CHAR	19	2	
5	NDC_LABELER_CODE	CHAR	21	5	
6	GCN_SEQ_CODE	CHAR	26	6	
7	GCN_CODE	CHAR	32	5	
8	BRAND_NAME	CHAR	37	30	
9	MANUFACTURER_NAME	CHAR	67	15	
10	PACKAGE_DESC	CHAR	82	10	
11	ADDITIONAL_DESC	CHAR	92	20	
12	DRUG_FORM_CODE_DESC	CHAR	112	2	
13	ROUTE_DESC	CHAR	114	10	
14	DRUG_CATEGORY_DESC	CHAR	124	30	
15	DEA_DESC	CHAR	154	30	
16	GENERIC_NAME_DRUG_IND_CODE	CHAR	184	1	
17	GENERIC_NAME_DRUG_IND_DESC	CHAR	185	15	
18	GENERIC_IND_MULTI_SRC_IND	CHAR	200	1	
19	GENERIC_USAN_NAME	CHAR	201	30	
20	HEDIS_NDC_GROUP_CODE	CHAR	231	30	
21	NDC_GRP01_CODE	CHAR	261	30	
22	THERA_AHFS_CLASS_CODE	CHAR	291	6	
23	THERA_AHFS_CLASS_DESC	CHAR	297	30	
24	THERA_GENERIC_CODE	CHAR	327	2	
25	THERA_GENERIC_DESC	CHAR	329	30	
26	THERA_STD_CODE	CHAR	359	3	
27	THERA_STD_DESC	CHAR	362	30	
28	THERA_SPECIFIC_CLASS_CODE	CHAR	392	3	

Field Num	Field	Type	Starting Position	Length	Notes
29	THERA_SPECIFIC_CLASS_DESC	CHAR	395	30	
30	CHANGE_DATE	DATE	425	8	CCYYMMDD
31	EFF_DATE	DATE	433	8	CCYYMMDD
32	TERM_DATE	DATE	441	8	CCYYMMDD
33	LABEL_NAME	CHAR	449	50	
34	THERA_AHFS_CLASS_DESC2	CHAR	499	30	
35	THERA_AHFS_CLASS_DESC3	CHAR	529	20	
36	GENERIC_PRICE_IND_CODE	CHAR	549	1	
37	UNUSED5	CHAR	550	5	REQUIRED FIELD Must be = MCS

Zip Code Extract (Optional)

The base Zip Code table available in MCSource contains 5-digit zip codes and their related metro service area, county, and state codes and descriptions. The zip code and metro service area information come from the 1993 Census Bureau file, and the county and state information come from Public Use Files made available on the HCFA web site. The base zip code table in MCSource does not contain 9-digit zip codes and does not contain information in the census division fields. If a customer has a source for 9-digit zip codes and their related geographic information, or has a more complete source for 5-digit zip codes, the customer has the option of extracting this data and loading it to MCSource.

If the updates to the Zip Code table are relatively small, these updates can be entered into or appended to the Zip Code - Local table in Access. There are no special procedures required for making updates to this table in Access.

If the file is large, an extract file consisting of one record per zip code should be created and loaded directly to the server. The extract can be created as either a fixed-width or a tilde (~) –delimited file, and the following guidelines apply:

- Since this file will replace the base Zip Code table provided by VIPS in the Access database, the extract file must contain records for the five-digit zip codes in order to be included in the warehouse.

- For a fixed-width file, the SCO parameter "ODL Zip" should be set to 1,modify,F.

- For a tilde-delimited file, the SCO parameter "ODL Zip" should be set to 1,modify,V (this is the default setting for this parameter). Also,

  - The first field does not begin with a tilde and the last field does not end with a tilde.

  - While the length of the fields may remain fixed-width (according to the file layout below), this is not a requirement.

- After the last byte of the last field, you need to terminate the line with an ASCII LF (Line Feed). The LF is equal to a hex '0A'. This might also be seen as '\n'.

- The file must be placed in the /mcsdata/ODL directory on the server and must be named "zip.odl".

- Prior to performing ODL (the process which takes the code tables from Access and prepares them for loading into the warehouse), the following changes should be made to the Access Codes database:

  - The table "Zip Code - Local" should be deleted.

  - For the row in the Code_Group_Info table where Code_Group = Zip-Code: Delete the values from the RI_Source and RI_Field_Name columns (these cells should be left blank); deselect the RefInteg and the ExportFlag columns; and set NewCodeSelect and SpacesSelect to the desired values.

  The steps described in this bullet apply only to the first time the Zip Code extract file is placed on the server; it does not need to be repeated for subsequent cycles.

Please note that the optional Zip Code Extract is not subject to the Reformat processing that is applied to the Product, Client Contract, Member, Provider, Claim, and Observation extract files. Therefore, all effort should be made to ensure the Zip Code extract file is in the correct format before it placing it on the server. If desired, VIPS can review a test file.

Following is the file layout for the Zip Code extract. Note that the starting positions apply to a fixed-width file.

Field Num	Field	Type	Starting Position	Length	Notes
1	ZIP_CODE	CHAR	1	9	REQUIRED FIELD
2	CENSUS_DVSN_NAME	CHAR	10	18	
3	COUNTY_NAME	CHAR	28	40	
4	STATE_NAME	CHAR	68	20	
5	CENSUS_DVSN_CODE	SMALLINT	88	5	
6	COUNTY_CODE	SMALLINT	93	5	
7	METRO_SERV_AREA_CODE	CHAR	98	5	
8	STATE_CODE	CHAR	100	2	
9	ZIP_GRP01_CODE	CHAR	130	30	
10	METRO_SERV_AREA_DESC	CHAR	165	35	
11	UNUSED5	CHAR	170	5	REQUIRED FIELD Must be = MCS

If the steps described in this Extract Guide do not meet the client's needs for populating the Zip Code table, VIPS can work with the client to determine a custom solution.

Source Plus Extract Information (Optional)

For clients that purchase the option to add Source Plus fields or tables to the data model, this section provides information on how to prepare the Source Plus extract files. (Many of the guidelines follow the same general guidelines presented at the beginning of this Extract Guide.) Source Plus fields may be added to the base data model tables, or entirely new Source Plus tables may be added. Where applicable, this document will distinguish between procedures for adding Source Plus fields to base tables and procedures for adding Source Plus tables.

Source Plus Extract File Layout

Before designing the Source Plus extract program, a data modeling and mapping session will be conducted to determine the requirements for the Source Plus fields or tables. The information from these sessions will be used to create table layouts including Mapping Worksheets that define each required field with its length and data type. The Source Plus Mapping Worksheets provide the layout that should be followed for the extract program.

The MCSource installation team will also supply you with COBOL file definitions (copybooks) that represent the desired file output format of your extracts for the Source Plus data. These file definitions in conjunction with this Data Extract Guide and the Mapping Worksheets supply the format of the requested data feeds as well as the rules to be applied to each field.

FYI – these files are fed into MCSource Reformat programs that are customized by VIPS programmers based on the Source Plus requirements. The purpose of the Reformat program is to perform basic edits on the data to ensure it is in the proper format for loading to the MCSource warehouse. VIPS programmers and analysts will work with you during the Source Plus mapping sessions to define the requirements of the Source Plus Reformat programs.

Source Plus Extract Program Inputs, Processing, and Output Requirements

Most of the guidelines presented in the section entitled "Extract Program Inputs, Processing, and Output Requirements" at the beginning of this document also apply to the Source Plus extract files. Please consult this section for general information, particularly for the proper formatting of numeric, alphanumeric (character), and date fields. The exceptions to these guidelines and additional guidelines that apply to Source Plus are summarized here.

Exceptions to General Guidelines:

- Validation of Code Values

  One function of the Standard Reformat program is to validate code values on base tables. If the Source Plus data is a new field added to a base table, the function to validate codes values is available. Please inform the VIPS installation team of any new Source Plus fields on base tables for which you want Reformat to validate code values. The VIPS programmer will need to add this to the Source Plus Reformat program.

  However, for a new Source Plus table, it is not currently possible for Reformat to validate code values for fields on this table. If the customer wishes to validate code values on new Source Plus tables, this process can be written into the extract program for the table. Please contact VIPS if you need assistance with this.

- Referential Integrity Checking of Legacy ID's

The Standard Reformat program performs referential integrity checking of legacy id fields, such as Legacy Member ID. This process ensures that there is a corresponding record in the appropriate dimension table, such as Member, to match the value contained in the legacy id field on the extract file. Referential integrity checking of legacy ids is NOT available in Source Plus Reformat programs. If the customer wishes to check referential integrity of legacy ids before the Source Plus table is loaded to the warehouse, this process can be written into the extract program. Please contact VIPS if you need assistance with this.

Additional Source Plus Guidelines:

- File Layout

  - All Source Plus fields must begin with "BP_".

  - When adding Source Plus columns to base tables, the Source Plus fields must be at the very end of the table. If the last Source Plus field on the table is variable width, and this causes problems in keeping each record fixed-width in the extract file, a 1 byte Filler field can be added to the end of the table and filled with a character to ensure that each record is fixed-width. (This Filler field will only be used for purposes of extracting and processing the file; it will not be stored on the warehouse.)

- Extract File Output – Naming Convention

  Source Plus extract files should be placed in the /mcsdata/legacy directory on the MCSource server, same as the standard extract files. For Source Plus columns added to base tables, the name of the extract file should follow the same convention as described for standard extract files. For new Source Plus tables, a good naming convention to use is to prefix the file with the customer's name, followed by the name of the table. For example, if XYZ Health Plan is creating a Source Plus extract file for a Referral table, they may name the file "xyz_referral".

Source Plus Extract Program Testing

The guidelines entitled "Extract Program Testing" presented at the beginning of this Guide should be also followed for Source Plus extract files. Special attention should be placed on testing that code validation and referential integrity checking are working properly, if these routines are included in the Source Plus extract program. It is recommended that the extract program produce summary reports of records that fail these checks in the program, so that these can be reviewed and corrected by the customer before the extract file is submitted for processing in MCSource.